STATE OF CALIFORNIA
CAPITAL OUTLAY
BUDGET CHANGE PROPOSAL (COBCP)
NARRATIVE PAGE (REV 06/15)

DEPARTMENT OF FINANCE 915 L Street Sacramento, CA 95814 IMS Mail Code: A15

BUDGET YEAR 2016-17

BUSINESS UNIT: 4440 COBCP NO: 4 PRIORITY: 4 PROJECT ID: 0000030

(7 digits; for new projects, leave blank)

DEPARTMENT: Department of State Hospitals

REQUIRES PROVISIONAL LANGUAGE (Y/N) N

PROJECT TITLE: Atascadero: East West Corridor Seismic Upgrade

TOTAL REQUEST (DOLLARS IN THOUSANDS): \$5,288 MAJOR/MINOR: Major

HAS A BUDGET PACKAGE BEEN COMPLETED FOR THIS PROJECT? (E/U/N/?): N

REQUIRES LEGISLATION (Y/N): N IF YES, LIST CODE SECTIONS: _____

PHASE(S) TO BE FUNDED: C PROJ CAT: SM CCCI/EPI: 4325/6069

SUMMARY OF PROPOSAL:

This seismic project will correct the structural deficiencies in the main East-West corridor at Atascadero State Hospital (ASH). This corridor is a major thoroughfare for the hospital and is integrated with multiple ward buildings. Hundreds of staff and patients travel along this corridor daily. Because this section of the hospital is designated a Risk Level V on the Division of the State Architect's (DSA) Seismic Risk Assessment scale, the Department of State Hospitals (DSH) is proposing to seismically retrofit it to lower the risk of injury or death in the event of an earthquake.

BUSINESS UNIT: 4440 COBCP NO: 4 PRIORITY: 4 PROJECT ID: 0000030

(7 digits; for new projects, leave blank)

A PURPOSE OF THE PROJECT:

Project Need:

The East-West Corridor was evaluated for seismic safety in January 1998 and was assigned a Risk Level V on the DSA's Seismic Risk Assessment scale. Structures with a Risk Level of V are designated as having a "substantial" risk to life in the event of an earthquake.

This corridor, which is over 800 feet long, is part of the main thoroughfare for ASH. The hospital is shaped like an "L," and is composed of two corridors ("East-West" and "North-South"). The two corridors are long, open hallways, and treatment rooms, patient housing, courtyards, etc. all connect off of these corridors. Should the corridor collapse in an earthquake, patients and staff in the corridor at the time of collapse could suffer injury or death, and those patients and staff in adjoining areas could be cut off from rescue.

In order to ensure that patients and staff are safe in the event of an earthquake, it is critical that the department seismically retrofit this corridor.

B. RELATIONSHIP TO THE STRATEGIC PLAN:

DSH operates under two core ethics when making long term planning decisions.

Departmental Mission:

"Providing evaluation and treatment in a safe and responsible manner, seeking innovation and excellence in hospital operations, across a continuum of care and settings."

Departmental Goals:

"A safe environment; Responsible stewardship; Excellence in forensic evaluation and Excellence in treatment."

The departmental mission of *providing evaluation and treatment in a safe and responsible manner* and the departmental goal of providing *a safe environment* is jeopardized when the life and safety of patients, staff, and the community and the continuity of services and operations of the hospital is compromised by the seismic stability of the East-West corridor. DSH has a responsibility and obligation to its staff and patients to carry out this project.

C. ALTERNATIVES:

Alternative #1 - Exterior Seismic Retrofit of the East-West Corridor

Pros:

- The hospital will correct the Fire and Life Safety issue related to the structural deficiency of the corridor.
- The exterior option does not disrupt the programs and operation of the hospital as much as an interior seismic retrofit.
- The majority of the work can be completed without security and safety measures having to be put in place (in contrast to an interior option, where the contractor will need to be extremely cautious due to proximity to patients and staff during the work).
- This project will meet current seismic standards and allow the department to conduct capital outlay improvement projects.

Cons:

• The state will need to dedicate capital funds for the project.

- The hospital may experience inconveniences during the project.
- Any structural elements below 10 feet on the building exterior may allow patients to climb up the side of building, which is a safety and security concern.

Alternative #2 – Interior Seismic Retrofit of the East-West Corridor

Pros:

- The hospital will correct the seismic issue related to the structural deficiency of the corridor.
- Contractor can work continuously within the interior of the corridor by progressive installation of structural lateral frames above the vehicle and pedestrian paths of travel.

Cons:

- The state will need to dedicate capital funds for the project.
- The hospital will experience potentially significant inconveniences during the project as work will be conducted from the inside of the structure.
- ASH will need to require strict security measures for the contractor which could impact site access.
- In order to avoid construction patients will be routed through courtyards which mean they cannot be used as activity yards.
- Exterior courtyards will need to be closed to facilitate work at corridor walls. The
 courtyards will have to be closed one at a time and then reopened once work is
 completed and the next courtyard closed. This minimizes the opportunity for time and
 costs savings due to construction efficiency.
- The project would suffer from increased costs due to having to deliver concrete over the two story north wing wards.
- The interior option would require the installation of two story high buttresses in the courtyards, which present security concerns as potential hiding or climbing opportunities by the patients.
- Modifications would need to be made at sections of the facility to facilitate access for delivery trucks.

Alternative #3 – Abandon the East-West Corridor

Pros:

• No capital expenditure of funds is needed to seismically retrofit the corridor.

Cons:

- ASH does not have capacity to relocate patients to solely the North-South corridor, nor
 do other state hospitals have the capacity to absorb ASH patients.
- Even if the hospital (or other hospitals) did have vacant beds sufficient for this purpose, abandoning the East-West corridor would greatly reduce the overall number of treatment beds and increase patient waitlists.
- If patients were moved from one facility to another, or even within ASH, considerable staff and transportation costs would be incurred by the department.

Alternative #4 – Maintain Status Quo (Do Nothing)

Pros:

- No expenditure of funds is needed.
- No staff time is expended in security clearances or to manage construction project.

Cons:

 The patients and staff utilizing this portion of the facility are at risk in the event of seismic activity.

D. RECOMMENDED SOLUTION:

1. Which alternative and why?

Alternative #1 – Exterior Seismic Retrofit of the East-West Corridor Due to the seismic concerns, the project is essential for the health and safety of DSH staff and patients, and abandoning the corridor isn't feasible. Of the two possible retrofit options, the exterior retrofit is the solution that has the least impact to hospital operations. Since the interior option requires the contractor to work in an area trafficked by patients, and has a stronger risk for patients to obtain tools or supplies that could be used as weapons, the exterior option also presents the least amount of danger to staff and patients.

2. Detail scope description.

The project will seismically retrofit the East-West corridor. To accomplish this:

- The corridor's concrete walls will be vertically braced by exterior concrete buttresses.
- The buttresses will be installed at 20-foot intervals at three work areas.
- Buttresses will be constructed on the exterior north face of the corridor wall.
- These elements will be supported by attachments to the walls, roof diaphragms, and extended vertical-and horizontal-placed concrete footing and anchor rods.

3. Basis for cost information.

Department of General Services (DGS) has provided a 3-page estimate dated 06-15-2015, enclosed.

4. Factors/benefits for recommended solution other than the least expensive alternative.

Given the liability to the state for the injury or death of employees and patients, this alternative may be the least expensive alternative. Additionally, providing a safe environment is intrinsically part of the department's long term goals. Protecting employees and patients is of paramount important to DSH.

Additionally, ASH and the other DSH hospitals could not accommodate patients residing off of the East-West corridor, and DSH cannot lose so many overall departmental beds. By doing an exterior retrofit, ASH will be ensuring that the project occurs with the least impact to hospital operations and the safety of patients and staff.

5. Complete description of impact on support budget.

There will be no impact to the support budget.

6. Identify and explain any project risks.

There are no known project risks.

- 7. List requested interdepartmental coordination and/or special project approval (including mandatory reviews and approvals, e.g. technology proposals).
 - Department of General Services
 - Project Management Branch
 - Division of the State Architect (DSA)
 - Environmental Unit (CEQA)
 - o Due Diligence
 - o Department of Public Health
 - OSHPD Certification
 - State Fire Marshal

E. CONSISTENCY WITH GOVERNMENT CODE SECTION 65041.1:

1. Does the recommended solution (project) promote infill development by rehabilitating existing infrastructure and how? Explain.

Yes. This project will retrofit an existing structure to prolong its safe use. No new buildings will be constructed.

2. Does the project improve the protection of environmental and agricultural resources by protecting and preserving the state's most valuable natural resources? Explain.

Yes. By protecting the occupants and buildings from the threat posed by structural failure and/or earthquake collapse, it preserves the use of existing buildings, which eliminates the need to construct new buildings and conserves natural resources.

3. Does the project encourage efficient development patterns by ensuring that infrastructure associated with development, other than infill, support efficient use of land and is appropriately planned for growth? Explain.

Yes. This project does not require construction of any new buildings or use of untouched land, existing utility infrastructure will continue to be used by the hospital.

DEPARTMENT OF GENERAL SERVICES REAL ESTATE SERVICES DIVISION - PROJECT MANAGEMENT AND DEVELOPMENT BRANCH PROJECT COST SUMMARY

PROJECT:	Seismic Retrofit, East-West Corridor	CCCI UPDATE:	U4DSH43BP
LOCATION:	Atascadero State Hospital, San Luis Ol	oispo Ct; EST. / CURR'T. CCCI:	4325 / 6069
CUSTOMER:	Department of State Hospitals	DATE ESTIMATED:	6/15/2015
DESIGN BY:	Consultant	ABMS NO:	139051
PROJECT MGR:	T. Schanberger	PREPARED BY:	LL
TEMPLATE:	Design / Bid / Build	DOF PROJ. I.D. NO.:	50.99.414

DESCRIPTION

Seismic retrofit at the main East-West corridor that is integrated with multiple ward buildings. Retrofit to include construction of steel framed lateral frames at upper third portion of corridor. Security sally port and temporary construction access doors shall be constructed for construction access into the corridor. East-West corridor currently is designated a Risk Level V. Upon completion of retrofit work, corridor will have a Risk Level III designation.

ESTIMATE SUMMARY

General Conditions Sitework (Demolition & Sally Port Construction) Concrete	\$234,500 \$44,200	
Masonry Steel Carpentry	\$1,087,400	
Thermal/Moisture Protection Doors/Windows Finishes Specialties Equipment Furnishings	\$16,800 \$107,200	
Special Construction Conveyances Mechanical Electrical Hazmat Abatement ADA/FLS Compliance	\$192,400 \$214,000 \$384,900	
ESTIMATED TOTAL CURRENT COSTS: Nov. 2004		\$2,281,400
Adjust CCCI From 4325 to 6069		\$919,900
ESTIMATED TOTAL CURRENT COSTS ON MAY 2015		\$3,201,300
Escalation to Start of Construction 26 Months @ 0.42% / Mo.: Escalation to Mid Point 6 Months @ 0.42% / Mo.:		\$349,600 \$80,700
ESTIMATED TOTAL CONTRACTS:		\$3,631,600
Contingency At: 7%	·	\$254,200
ESTIMATED TOTAL CONSTRUCTION COST:		\$3,885,800

SUMMARY OF COSTS BY PHASE

PROJECT:

Seismic Retrofit, East-West Corridor

CCCI UPDATE:

U4DSH43BP

LOCATION:

Atascadero State Hospital, San Luis Obispo Cty DATE ESTIMATED:

6/15/2015

ABMS #:

139051

CONSTRUCTION DURATION:

12 MONTHS

ESTIMATED CONTRACT:

\$3,631,600

\$3,631,600

CONSTRUCTION CONTINGENCY:

\$254,200

\$254,200

TOTAL:

\$3,885,800

\$3,885,800

CATEGORY	ACQUISITION STUDY 00	PRELIMINARY PLANS 01	WORKING DRAWINGS 02	CONSTRUCTION 03	TOTAL
ARCHITECTURAL AND					
ENGINEERING SERVICES					
A&E Design		\$192,500	\$228,900	\$175,800	\$597,200
Construction Inspection				\$283,500	\$283,500
Construction Inspection Travel				\$68,400	\$68,400
Builders Risk Insurance				\$36,300	\$36,300
Advertising, Printing and Mailing		\$0	\$19,500		\$19,500
Construction Guarantee Inspection				\$13,800	\$13,800
SUBTOTAL A&E SERVICES	\$0	\$192,500	\$248,400	\$577,800	\$1,018,700

OTHER PROJECT COSTS					
Special Consultants (Hazmat & Geotec	ch)	\$11,400	\$16,500	\$93,000	\$120,900
Materials Testing				\$39,800	\$39,800
Project/Construction Management		\$34,400	\$63,500	\$177,400	\$275,300
Contract Construction Management		\$22,000	\$32,300	\$390,000	\$444,300
Project Scheduling & Cost Analysis		\$20,500			\$20,500
Agency Retained Items					\$0
SBE/DVBE Assessment		\$3,200		\$12,500	\$15,700
Peer Review		\$10,000	\$10,000		\$20,000
Hospital Checking			\$54,500		\$54,500
Essential Services			\$0		\$0
Accessibility Checking			\$7,900		\$7,900
Environmental Document		\$13,200			\$13,200
Due Diligence		\$13,200			\$13,200
Other Costs - (SFM)		\$600	\$3,500	\$47,000	\$51,100
Other Costs - (Permit/Reg. Fees)		·			\$0
Other Costs - (ARF Assessment)	\$0	\$4,000	\$5,400	\$64,400	\$73,800
SUBTOTAL OTHER PROJECT COSTS	\$0	\$132,500	\$193,600	\$824,100	\$1,150,200

TOTAL ESTIMATED PROJECT COST	\$0	\$325,000	\$442,000	\$5,287,700	\$6,054,700
LESS FUNDS TRANSFERRED	\$0	\$325,000	\$0	\$0	\$325,000
LESS FUNDS AVAILABLE NOT TRANSFERRED	\$0	\$0	\$442,000	\$0	\$442,000
CARRY OVER	\$0	\$0	\$0	\$0	
BALANCE OF FUNDS REQUIRED	\$0	\$0	\$0	\$5,287,700	\$5,287,700

FUNDING DATA & ESTIMATE NOTES

PROJECT:

Seismic Retrofit, East-West Corridor

Atascadero State Hospital, San Luis Obispo Cty

CCCI UPDATE:

U4DSH43BP 6/15/2015

LOCATION: ABMS#:

139051

DATE ESTIMATED:

FUNDING DATA

Chapter / Item	<u>Phase</u>	<u>Amount</u>	<u>Totals</u>
Fund Transfers			
0025/2014 - 4440 - 301 - 0001(2)	P	\$325,000	
0	0	\$ 0	
0	0	\$ O	
0	0	\$0	
0	0	\$ O	
0	0 .	\$0	
0	0	\$ 0	
0	0	\$ 0	
Total Funds Transferred		· -	\$325,000
Funds Available Not Transferred			
0010/2015 - 4440 - 301 - 0001(1)	W	\$442,000	
0	0	\$0	
0	0	\$0	
0	0	\$0	
Total Funds Available not Transferred		•	\$442,000
Total Funds Transferred and Available			\$767,000

ESTIMATE NOTES

- 1. The construction costs in this estimate are indexed from the CCCI Index as of the date of estimate preparation to the CCCI index that is current as of MAY 1, 2015. The project estimate is then escalated for a 6 month period to an assumed construction midpoint. Additionally, the project has been escalated to the assumed start of construction.
- 2. The Agency may have retained items that are not included in this estimate. RESD has not verified Agency retained pricing.
- 3. Special Consultant costs include Survey w/ Topo Map, Geotechnical, Asbestos / Lead Survey & Monitoring, and Utility Design Fees.
- 4. Guarding costs, if required, are not included with this estimate.

5. 0

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STATE OF CALIFORNIA CAPITAL OUTLAY BUDGET CHANGE	PROPOS	SAL (CORCE	1			Proj ID:	Budge 0000030	et Ye	ar 20°	16-17
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Department Title: Departm	ent of Sta	te Hospitals	rieri erik garden voluk	Autorit (#1900), vil self Alde Cillian	, e vizen a mizione en en	te i et traffik i Stor et traffe etter i friste ete	Progarm ID		439	5
Project Title: Atascad	ero: East	West Corrido	r Seismic Upg	grade			COBCP#:	•	4	
Program Category: Seismic	(SM)						Priority:		4	
Program Subcategory: *****							MA/MI:		MΑ	1
		Existing Authority	January 10 Action		May 1 Action		Special Action	Pr	oject	Total
FUNDING / bu-ref-fund-eny-year ph	action			A. paragraphical	44. 9	11.5%	3 6.8 3			
4440-301-0001-14-14 P BA	١	325					·			325
4440-301-0001-15-15 W BA		442		1					A 100 E	442
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TOTAL FUNDING		767	5,288	0	Q.(g.) 11 s	0	0	0		6,055
Study Acquisition Performance Criteria Preliminary Plans Working Drawings Total Construction or Design-Build Equipment (Group 2)		325 442	5,288	On the State of th	or the State of	0	0	0		0 0 325 442 5,288
TOTAL COSTS		767	5,288	101	01 J.M. K	0	0	0		6,055
CONSTRUCTION OR			· · · · · · · · · · · · · · · · · · ·							
DESIGN-BUILD DETAIL Contract			3,632							0 3,632
Contingency			254					-		254
A&E			578			· • · • · · · · · · · · · · · · · · · ·		_		578
Agency Retained			310					3	Anglin	. 0
Other			824	-						824
TOTAL CONSTRUCTION OR			021	Frankiska i d				4 3	eraero eraeros	
DESIGN-BUILD		5,288	5,288	0		0	0	ol		5,288
FUTURE FUNDING	<u></u>	0	0	0		0	0	히		 (
TOTORETORDING	I						-			
SCHEDULE		mm/dd/yyyy		PR	OJECT S	SPECIFIC CO	ODES			
Study Completion		12/30/2004		Proj Mgmt:	Y	Location:	DSH-Atasca	dero		
Acquisition Approval	-	-		Budg Pack:	N	County:	San Luis Obi			
Start Preliminary Plans/Performance Cri	iteria -	1/21/2014		Proj Cat:	SM	City:	Atascadero			
Preliminary Plan/Performance Criteria A	_	5/19/2016		Req Legis:	N	Cong Dist:	22			
Approval to Proceed to Bid	-Prio 101	2/27/2017		Req Prov:	N N	Sen Dist:	15			
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Contract Award Approval		7/25/2017		SO/LA Imp:	N	Assm Dist:	33			

STATE OF CALIFORNIA	e에 하하면 회회교육에 있는 하는 그에 가격하고 하면 있는 모모는 해결과 생활을 보고를 가면 있었다. 경우를 가는 것은 사람이 있었다는 모든 모든 하는 것 같아. 그는 그 그 가하기 있다는 것도 하는 수 있	Budget 0000030	Year 2016-17
FISCAL DETAIL WORK	그는 사람들이 많은 것이 되는 것이 점점을 하면 하는 사람들이 살아왔다면 그는 것이 되었다. 그는 사람들이 되었다면 하는 것이 없는 것이 없는 것이 없는 것이다. 그렇게 되었다면 살아보다는 것이 없는	BU/Entity:	4440
[曹州] 智利 海州 医乳 气流 医乳化症 医自动数计设置 医动物性畸形 置 经缺税	Department of State Hospitals	Progam ID	4395
Project Title:	Atascadero: East West Corridor Seismic Upgrade	COBCP #:	4
Program Category:	Seismic (SM)	Priority:	4
Program Subcategory:		MA/MI:	MA
	t into the categories listed below. Attach a detailed list if funding is included in this re ems for which you plan to request funding in the future. When possible, identify fund		
P	ROJECT RELATED COSTS	COST %	TOTAL 🐇
AGENCY RETAINED:			
Balvarada — Limbrasani.	TOTAL AGENCY RET	L TAINED	0
GROUP 2 EQUIPMENT	TOTAL ACTION AND A STATE OF THE ACTION AND A		
	TOTAL GROUP2 EQL	JIPMENT	0
IMP	ACT ON SUPPORT BUDGET	COST	TOTAL
ONE-TIME COSTS	en e		
	TOTAL SUPPORT ONE-1	TIME COSTS	0
ANNUAL ONGOING FU	TURE COSTS		
3	TOTAL SUPPORT ANNU	JAL COSTS	0
ANNUAL ONGOING FU	TURE SAVINGS		
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ANNUAL ONGOING FU			
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	TOTAL SUPPORT ANNUA	AL REVENUE	1 0

STATE OF CALIFORNIA	Budget Y	ear 2016-17
CAPITAL OUTLAY BUDGET CHANGE PROPOSAL (COBCP)	3000030	
SCOPE/ASSUMPTIONS WORKSHEET	BU/Entity:	4440
Department Title: Department of State Hospitals	Progarm ID	4395
Project Title: Atascadero: East West Corridor Seismic Upgrade	COBCP #:	4
Program Category: Seismic (SM)	Priority:	4
Program Subcategory:	MAMI:	MA

Project Specific Proposals: For new projects provide proposed Scope language. For continuing projects provide the latest approved Scope language. Enter Scope language in cell A110.

Conceptual Proposals: Provide a brief discussion of proposal defining assumptions supporting the level of funding proposed by fiscal year in relation to outstanding need identified for that fiscal year. (Also include scope descriptions for BY+1 through BY+4 in cell A110).

This seismic project will correct the structural deficiencies in the main East-West corridor at Atascadero State Hospital (ASH). This corridor is a major thoroughfare for the hospital and is integrated with multiple ward buildings. Hundreds of staff and patients travel along this corridor daily. Because this section of the hospital is designated a Risk Level V on the Division of the State Architect's (DSA) Seismic Risk Assessment scale, the Department of State Hospitals (DSH) is proposing to seismically retrofit it to lower the risk of injury or death in the event of an earthquake.